Child and Family Services 1 Update

March 2005

New Staff:

On March 10, 2005 Janet Lung will be transferring from the Office of Mental Health Services to the Office of Child and Family Services as a Child and Adolescent Program Manager. Janet replaces Pam Cooper who resigned in October 2005. Janet brings strong professional work experience in program planning and grant management. She is a Licensed Clinical Social Worker. She has experience in the system of care model and evidence based practices for children.

Recruitment Activities:

The Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS)- Office of Child and Family Services is recruiting for the position of a Child and Adolescent Program Specialist. The position closed February 25, 2005. The salary range is \$35,695 - \$56,905.

Presentation by Division of Community Services

The Division of Community Services, that includes the Offices of Mental Health, Mental Retardation, Substance Abuse Services, Child and Family Services and the Office of Performance Contracting, made a presentation to the Commissioner's Management Staff on January 31, 2005. The presentation focused on the Department's vision statement of promoting recovery, empowerment, self-determination, and resiliency with use of evidenced based practices. Information was provided on the following activities:

- Primary functions of the offices in the division of community services
- Staff /employees in the division
- Community based investments
- Community based efforts
- Activities for influencing policy
- Promoting partnerships

Mental Health Initiative:

Using Community Services Submission (CSS), the Office of Performance Contracting has compiled information on the referral sources for reporting non-mandated children and the number of children Community Service Boards (CSBs) are serving. The form provides information on all referral sources

The Office of Child and Family Services has developed a form for reporting non-mandated expenditures on a quarterly basis. This form will help track CSBs' expenditures and determine which CSBs are not using the funding as well as identify funds that may need to be reallocated to other CSBs for maximization of the non-mandated funds.

Meetings/Workgroups

329 G- Report/Child and Adolescent Special Populations Workgroup

The 329- G/330-F Workgroup meets monthly on the second Thursday of every month. The Child and Adolescent Populations workgroup has been merged with this workgroup. To alleviate the continued name change each year due to the budget language, the group has a new name, the Child and Family Behavioral Health Services Planning and Policy Committee. The committee has developed a purpose statement, operational guidelines and elected a chair, Brian Meyer and Vice Chair, Fran Gallagher, to facilitate the work of the committee. Letters were disseminated from the Chair asking for continuation of old members and requesting new members to work on the agenda for children and their families with behavioral health issues. The next meeting of the work group is March10, 2005 at Department of Rehabilitative Services Office, Willow Lawn Drive.

Child and Family Advisory Committee

One of the 329-G recommendations was that the Department established a Child and Family Advisory Group that would advise and assist the new office with issues impacting children and their families. The goal is to have 51% family membership. Currently, there are 13 families attending the meeting. The Advisory Group meets quarterly and met last on February 15, 2005. The families have requested at each meeting that a state agency provided in-depth information about the agency's mandate, services provided, local counterparts, and monitoring and accountability issues. The Department of Juvenile Justices presented at the last meeting. Families found the information to very helpful as well as understandable. The Committee is still trying to get representation from Department of Social Services. Information was given to the Committee about the mission of the Department and information from the Office of Child and Family Services. A subcommittee was selected to work on a mission and vision statement for the Office of Child and Family Services that take into consideration family friendly language. They will report out at the next meeting on May 17th.

Case Management Workgroup

The Department has established a Case Management Workgroup comprised of case managers working with the MH, MR and SA population. The purposes of the workgroup are to:

- Ensure that a statewide model of case management services for MH/MR/SAS reflects the values that are presently defined in the Vision statement
- Gain a better understanding of the models of service delivery that now exist with the 40 CSB and begin to identify better understanding of the best practice models for case management within the 40 CSBs around disabilities
- Address changing demands on case managers and the need to promote a stable workforce that promotes continued career development in case management.

The next meeting of the workgroup is March 17, 2005.

A Child and Adolescent Coordinator is needed to serve on the workgroup

Relinquishment of Custody

The Relinquishment of Custody workgroup finalized its report to the State Executive Council of the Community Services Act in November 2004. The workgroup will continue meeting in FY 05 to address and refine its report and recommendations on how to address families giving up custody of their children with a behavioral heath needs to receive services. The workgroup met on March 3 to begin reviewing the report and recommendations.

Meeting with the Department of Medical Assistance Services (DMAS) on Early and Periodic Screening, Diagnostic, and Treatment (EPSDT)

Staff met with DMAS regarding EPSDT. DMAS is ready to develop the process and protocol for children to access substance abuse services through EPSDT. They will be forming a workgroup to help develop the protocol, provider requirements and training needs as well as the reimbursement process and codes. Staff from DMAS has agreed to come to the Child and Adolescent Coordinators' meeting to discuss EPSDT on March 4th.

Parents and Children Coping Together (PACCT)

The Department has a contract with PACCT to identify and train family members of children with mental health disorders and related disorders or who are at-risk of developing mental health disorders to serve as parent representatives on state and local planning meetings. These family members shall have children under the age of 18 at the time of training. Additionally, the contract provides for support through mini-grants (up to \$500 maximum) and technical assistance to family support groups and networks, and linkages for families of children with mental, emotional and behavioral disorders. PACCT has been working with the Federation of Families and will be sponsoring a conference for families on May 19th in Fredericksburg with collaboration an input from the Federation of Families. The conference will focus on three tracks.

- Track 1 Family
- Track 2 Family Representatives
- Track 3 Family Resources

Mental Health and Juvenile Justice

The Department of Criminal Justice Services has signed a contract with the Department for the continuation of the MH/JJ JJ initiative from January 1 through December 2005. Beginning in 2006, the Department will have to put up 50% of the match to continue to the grant.

Conference and Training

Martha Kurgan is coordinating the System of Care Conference that will be held March 22-23 at the Hotel Roanoke. She is working with the Partnership with People with Disabilities at VCU to disseminate the announcement and brochure for registration. A letter from Commissioner Reinhard was disseminated to every CSB Executive Director requesting their participation in the conference by sending a 6-member team. Key stakeholders from other agencies have also received the conference information and were asked to participate. We are calling CSBs that do not send representatives to the

Child and Adolescent Coordinators meeting to garner their support and participation. We anticipate 300 participants attending the conference.

Additional Training on Systems of Care

The National Technical Assistance Center for Children's Mental Health at Georgetown University is co-sponsoring an exciting training initiative to build a network of key leaders who are trained in a detailed understanding of what it takes to build effective systems of care. Based on Building Systems of Care: A Primer, by Sheila Pires, the training covers the structure and elements of effective systems of care and the strategic processes essential to engaging partners in systems building. The training will be held April 21& 22 in Washington, D.C. This information was emailed to coordinators. We have registered the following persons:

Shirley Ricks
Mary Ann Discenza
Martha Kurgans
New Hire- (Janet Lung)
Carolyn Arthur
Alicia Bush (registered herself)

Virginia Summer Institute for Addiction of Addiction Studies (VSIAS)

VSIAS is a week- long institute devoted to training providers regarding substance abuse treatment and prevention services. The Institute will be held at the College of William and Mary in Williamsburg July 18-22, 2005. The Institute will focus on 3 themes for this year:

- The Family
- Co-occurring Disorders
- Evidence Based Programs

Dr. Ira Chasnoff will be doing a day-long presentation on Substance Exposed Infants on Wednesday, July 20th. Mark your calendars and plan to attend the Institute.

Legal Issues Involved in Working with Children and Adolescents, March 21 & 22

This one-and-a-half day program will address issues unique to working with the juvenile mental health, mental retardation, and substance abuse populations. Topics to be covered include consent to treatment, confidentiality of minors' medical records, the Psychiatric Inpatient Treatment of Minors Act, clinical assessment of minors, and tips on working with Guardians Ad Litem, Court Appointed Special Advocates, and the Department of Social Services. \$45 (includes lunch)

Budget Information

The Department requested state funding to address the deficit in early intervention. The state budget includes \$2.25 in FY 05 and \$2.25 in FY 06 for funding for early intervention.

State funds were requested for several demonstration pilots that restructure how funding should be utilized to serve children with Severe Emotional Disturbance. The budget includes for FY 06, \$1Mfunding to support two demonstration projects based on evidence based "systems of care" models for children and adolescent with behavioral health needs.

The budget also includes for FY 06, \$500,000 to expand non-mandated funding to provide services to children and their families

Legislation on Behavioral Health Issues

SB 1188 -This bill amends current code language by establishing local lead agencies to implement local early intervention systems across the Commonwealth and changes the role of the existing local interagency coordinating councils to one of advising and assisting the local lead agency. The legislation identifies the membership of local interagency coordinating councils and delineates the duties of the local public agencies including providing services as appropriate and agreed upon by members of the local interagency coordinating council; maintaining data and providing information as requested to their respective state agencies; developing and implementing interagency agreements; complying with applicable state and federal regulations and local policies and procedures; and following procedural safeguards and dispute resolution procedures as adopted by the Commonwealth.

HB 2245 -Requires the Board of Juvenile Justice in consultation with DMHMRSAS to promulgate regulations for the planning and provision of treatment services for adolescents returning to the community following commitment to a juvenile correctional center or detention facility.